

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD AND APPARATUS FOR PROVIDING CONTENT ACCESS CONTROLS TO ACCESS THE INTERNET
Attorney Docket Number::	038069-0102
Request for Early Publication?::	No
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	1
Total Drawing Sheets::	15
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Robert L.
Family Name::	DAHLSTROM
City of Residence::	Jacksonville
State or Province of Residence::	Florida

**Country of Residence::** US  
**Street of mailing address::** 1045 Sorrento Road  
**City of mailing address::** Jacksonville  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** 32207

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Kevin  
**Family Name::** BESPOLKA  
**City of Residence::** Vero Beach  
**State or Province of Residence::** Florida

**Country of Residence::** US  
**Street of mailing address::** 10612 Charleston Drive  
**City of mailing address::** Vero Beach  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** 32963-4751

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** David  
**Family Name::** DeWALD  
**City of Residence::** Jacksonville

**State or Province of** Florida  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 3938 Sierra Madre Drive South  
**City of mailing address::** Jacksonville  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** 32217

**Correspondence Information**

**Correspondence Customer Number::** 23524  
**E-Mail address::** PTOMailMadison@Foley.com

**Representative Information**

<b>Representative Customer Number::</b>	23524	
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**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>

**Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

**Assignee Information**

**Assignee name::** Kidsnet, Inc.